

EMPLOYMENT OPPORTUNITY

20 East Sixth Street • Tempe, Arizona 85281 • 480/350-8276 • TDD 480/350-8400
<http://www.tempe.gov>

Committed to Equal Opportunity and Reasonable Accommodation



UTILITY SERVICES SUPERVISOR (Water Utilities Department / Operations) Recruitment Code #: 300201

OPENING DATE: August 25, 2008

CLOSING DATE: Open until the needs of the City are met. First review of applications will be **September 8, 2008**; this position may close at that time.

ANNUAL SALARY RANGE
\$55,070 - \$74,334

This position is FLSA Non-Exempt - eligible for overtime compensation and/or compensatory time.

Employees in this position are represented by the Tempe Supervisor's Association (TSA).

MINIMUM QUALIFICATIONS

Education:

Requires formal or informal education or training which ensures the ability to read and write at a level necessary for successful job performance.

The term "equivalent" means that directly related work experience exceeding the required work experience will substitute in equal time increments for college-level education, for example: one year of additional directly related work experience will substitute for one year of college education (30 credit hours).

Work Experience:

Requires the equivalent to four years of full-time increasingly responsible utilities system maintenance, installation and repair experience including one year of lead or supervisory responsibility.

Candidates must have the minimum amount of work experience. Education will not substitute for the required work experience; however, related unpaid and/or volunteer work experience may be used as qualifying work experience.

Certifications, Licenses, and/or Registrations:

- Possession of, or ability to obtain, an appropriate, valid Arizona driver's license.
- Possession of the Grade IV Water Distribution and the Grade IV Wastewater Collection System Operator certificates issued by the State of Arizona.

ADDITIONAL REQUIREMENTS

If requesting veteran's preference, the appropriate DD214 must be attached at the time of application. Successful completion of probationary period is contingent upon passing an FBI background investigation.

REPRESENTATIVE DUTIES

(For the complete job description go to: www.tempe.gov/jims)

- Recommend and assist in the implementation of goals and objectives; establish schedules and methods for water or wastewater maintenance staff; implement policies and procedures.
- Plan, prioritize, assign, supervise and review the work of staff involved in water or wastewater maintenance, repair and construction work including the maintenance of water and wastewater lines, valves, fire hydrants and meters.

- Participate in the selection of staff; provide or coordinate staff training; work with employees to correct deficiencies; implement discipline procedures.
- Answer questions and provide information to the public; investigate complaints and recommend corrective action as necessary to resolve complaints.
- Coordinate maintenance activities with other divisions and departments as well as outside agencies and contractors.
- Ensure proper water shut downs during construction and maintenance activities as well as emergency water breaks; ensure proper disposal of sewage.
- Monitor and coordinate the wastewater pest control program; ensure proper use of pesticides; investigate customer complaints as required.
- Ensure proper mapping of underground utilities; maintain water and wastewater maps, location books and related records; locate utilities in conjunction with maintenance and repair activities and outside construction activities; assist in developing and implementing computer mapping system.
- Check water and wastewater facilities and equipment for needed maintenance and repairs; implement and monitor a preventive maintenance program.
- Assist in the preparation of the section budget.
- Inspect the work of crews while in progress and upon completion; provide advice and assistance to maintenance staff as required.
- Prepare a variety of reports and maintain records, logs and files.
- Perform work and operate a variety of equipment in emergency situations as required.
- Perform related duties as assigned.

SELECTION CRITERIA

An official City of Tempe application must be filled out in order to be considered for this position. Applicants whose experience and training most closely suit the needs of the City may be selected for further testing/interviews. The City of Tempe conducts thorough background checks. Falsifying information or lying during any stage of the selection/hiring process will make you ineligible for new or continued City employment.

TLM/mcp



City of Tempe / Application for Employment

City of Tempe / Human Resources / 20 East Sixth Street / Tempe AZ 85281 / (480) 350-8276 / TDD (480) 350-8400 / <http://www.tempe.gov>

The City of Tempe is an Equal Opportunity / Reasonable Accommodation Employer.

The City of Tempe Promotes a Drug and Alcohol Free Workplace.

DIRECTIONS:

Read the recruitment bulletin before completing this application - request a copy if not provided. Answer all questions completely including any supplemental forms. Type or print neatly in black ink. Sign this application and all other forms. Any omission, misstatement, or falsification may be cause for rejection of this application, removal of your name from an eligibility list, or discharge from City Service.

1. Position Applying For: _____ Recruitment Code (RC#): _____
2. Name (Last, First, Middle Initial): _____
3. Social Security Number: _____
4. Mailing Address: _____
Street Address City State Zip
5. Phone Number: HOME: _____ WORK: _____
6. Driver's License (Number, State, Class): _____
7. Are you a U.S. Citizen or a non-U.S. Citizen authorized to work in the United States? Yes No
8. Have you ever worked for the City of Tempe? Yes No If Yes, from _____ (Mo/Yr) to _____ (Mo/Yr)
If you are a current City of Tempe employee, are you: Temporary? Regular?
Have you completed your initial six (6) month probationary period? Yes No
9. To assist us with verifying previous work experience and /or education, please list other names you have gone by:

10. Type of position you will accept: Full Time Part Time Regular Temporary
11. Are you claiming Civil Service Preference for Veteran's under ARS 38-492:
 - As a qualified or disabled veteran? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
 - As a spouse of an eligible veteran pursuant to ARS 38-492(D)? Yes No If yes, you must submit Form DD214, or certification from the Veteran's Administration.
12. Are you related to any member of the Tempe City Council or any Tempe Commission/Board Member, or any City of Tempe employee? Yes No If Yes, indicate his/her **Name, Position, and Relationship to you:**

DO NOT WRITE BELOW THIS LINE - TURN PAGE AND CONTINUE

Q ☐ NQ ☐ A ☐ B ☐ C ☐ Application Entered ☐

HR Review ☐

Date

Department Review ☐

Date

Proof of Education and/or Professional Registration(s), License(s), and Certification(s) will be required prior to hire/promotion.

13. Do you have a High School Diploma or a G.E.D.? Yes No

14. Education from an **Accredited** College/University:

College:	Major:	Type of Degree:	Degree Completed:	Credit Hours:
			Yes No	
			Yes No	
			Yes No	
			Yes No	

15. Trade and/or Technical Schools:

Trade/Technical School:	Subject Studied:	Type of Degree:	Degree Completed:	Credit Hours:
			Yes No	
			Yes No	

16a. Professional Registration(s), License(s), and/or Certification(s) you possess ***that relate to this position:***

Type of Professional Registration, License, and/or Certification:	License Number (if applicable):	Date Received:	Expiration Date (if applicable):

16b. Special training ***that relates to this position:***

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17. List computer software program(s) with which you are proficient in operating ***that relate to this position:***

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18. List equipment with which you are proficient in operating ***that relate to this position:***

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19. Language Proficiency (Other than English):

Language:	Speak:	Read:	Write:
	Yes No	Yes No	Yes No
	Yes No	Yes No	Yes No
	Yes No	Yes No	Yes No

20. **May we contact your current employer if you are considered for hire/promotion?** Yes No

You may make copies and use as many of these sheets as necessary to continue your employment history.

Begin with your present or most recent position. List all jobs, paid or volunteer, for at least the past ten years. Your qualifications will be evaluated **solely** on the application form and, if applicable, any supplemental questionnaire(s).

RESUMES MAY **NOT** BE SUBSTITUTED FOR THE REQUESTED INFORMATION.

DO NOT WRITE "SEE RESUME" IN THE SPACES BELOW.

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Present/Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:
Address:	Phone:
Job Title:	Number of Employees Supervised:
Supervisor (Name/Title/Phone):	
Employment Dates: from (Mo/Yr) to (Mo/Yr)	Total Time Employed: Yrs Mos
Hours Per Week:	Ending Wage: \$ Per
Work Performed:	
Reason for Leaving:	

Employer:	Type of Business:
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Supervisor (Name/Title/Phone):	
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Work Performed:	
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Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Present/Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$ Per		
Work Performed:			
Reason for Leaving:			

Employer:	Type of Business:		
Address:	Phone:		
Job Title:	Number of Employees Supervised:		
Supervisor (Name/Title/Phone):			
Employment Dates: from	(Mo/Yr)	to	(Mo/Yr)
Total Time Employed:		Yrs	Mos
Hours Per Week:	Ending Wage: \$		Per
Work Performed:			
Reason for Leaving:			

21. Have you ever been requested or forced to resign from a position for misconduct or unsatisfactory service?

Yes No If Yes, please explain:

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22. Have you ever been convicted of a **misdemeanor** or **felony** (other than minor/civil traffic offenses), placed on probation, fined or given a suspended sentence (include military trial convictions)?

Note: Reckless operation, hit-and-run, D.U.I., excessive speeding, and similar charges are NOT considered minor traffic offenses. Moreover, an excessive number of traffic violations (including minor/civil offenses) should be reported.

Yes No If Yes, provide charges, dates and locations:

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Convictions will not automatically bar an applicant from employment for City jobs. The relationship of the conviction to the job, as well as its severity, the passage of time, and subsequent job performance will all be considered.

PLEASE READ THIS STATEMENT AND CAREFULLY REVIEW YOUR ENTIRE APPLICATION MATERIAL .

I certify that all statements made on the application form and, if applicable, any supplemental questionnaire(s) are true and complete. I understand that any omission, misstatement, or falsification may be cause for rejection of this application, removal of my name from an eligibility list(s), and/or discharge from City Service. In addition, I authorize any individual, company, organization, or institution to release any and all information concerning statements made by me on this application, and I do hereby release all parties and individuals connected therewith from all liabilities for any damages whatsoever incurred in furnishing such information.

By checking this box and typing your name below, you certify that you have read and understand the above paragraph.

Print Applicant's Name: _____ Date_____

Applicant Signature_____ Date_____

The City of Tempe does not accept faxed copies of applications.



Optional Employment Data Record

Completing ethnicity, gender, age and disability information is **OPTIONAL**; it is used for statistical reporting purposes only. It is **NOT** disclosed to the hiring department.

Position Applied for: _____ RC#: _____

Name: _____ Date: _____
Last First

Gender: Female Male

Disabled: Yes No

Ethnic Group:

White

Black

Hispanic

Asian

American Indian

Other

Age Group:

16 and under

17 – 20

21 – 29

30 – 39

40 +

Highest grade completed: _____

How did you hear about this position: _____